



AF JW
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Kotani, et al.
Appl. No. : 09/937,365
Filed : January 18, 2002
For : COMPOSITIONS FOR
PREVENTING AND TREATING
TYPE I ALLERGY
Examiner : R. Joynes
Group Art Unit : 1615

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

October 20, 2004

(Date)


Katsuhiro Arai, Reg. No. 43,315

AMENDMENT AFTER FINAL

Mail Stop AF

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the final Office Action mailed April 20, 2004, please reconsider the present application in light of the following amendments and comments.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

10/27/2004 JBALINAN 00000010 09937365

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980.00 DP

**PATENT**

Case Docket No. SAEGU92.001APC

Date: October 20, 2004

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In re application of : KOTANI, et al.
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Mail Stop AF
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final in the above-identified application.

(X) An extension of time to respond for 3 month(s) is hereby requested.

Time Extension Fee:

(X) three months (\$980 large entity)

The fee has been calculated as shown below:

CLAIMS AS FILED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	33	—	33	= 0 ×	\$18	= \$0
Independent Claims	5	—	5	= 0 ×	\$88	= \$0
Time Extension Fee						\$980
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$980	

(X) Amendment After Final in ten (10) pages.

(X) Copies of "Dermatitis, Atopic," "PRINCIPLES OF DIAGNOSTICS AND THERAPY OF POLLINOSIS IN THE PRE-SCHOOL CHILDREN," and "THE SPECIFIC IMMUNOTHERAPY IN POLLINOSIS" are enclosed for the Examiner's references.

(X) Return prepaid postcard.

(X) A check in the amount of \$980 is enclosed.

- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.
- (X) Please use Customer No. 20,995 for the correspondence address.



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